

02-15-02

PTO/SB/05 (3-01)
OMB 0651-0032

Please type a plus sign (+) inside this box

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonapplications under 37C.F.R. §1.53(b))

Attorney Docket No.

PC11838A

First Inventor

Harry R. Howard Jr.

Title

COMBINATION TREATMENT FOR SLEEP DISORDERS
INCLUDING SLEEP APNEA

Express Mail Label No.

EF321675647US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Commissioner for Patents
Box Patent Application
Washington, DC 202311. ☒ *Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)2. ☐ Applicant claims small entity status
See 37 CFR 1.273. ☒ Specification [Total Pages 48]
(preferred arrangement set forth below)
- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to sequence listing, a table,
or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure4. ☐ Drawing(s) (35 U.S.C. 113) [Total sheets]5. ☒ Oath or Declaration [Total pages 1]
a. ☒ Newly executed (original or copy)
b. ☐ Copy from a prior application (37 CFR §1.63(d))
(for continuation/divisional with Box 18 completed)
i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b).6. ☒ Application Data Sheet. See 37 CFR 1.767. ☐ CD-ROM or CD-R in duplicate, large table or
computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)a. ☐ Computer Readable Copy (CRF)

b. Specification Sequence Listing on:

i. ☐ CD-ROM or CD-R (2 copies)ii. ☐ Paperc. ☐ Statement verifying identity of above copies**ACCOMPANYING APPLICATION PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☒ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS
Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35
or its equivalent.
17. ☐ Other:

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment,
or in an Application Data Sheet under 37CFR 1.76.☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: / Prior application information: Examiner Group/Art Unit: For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under
Box 5b is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.
The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts**18. CORRESPONDENCE ADDRESS**☒ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or ☐ Correspondence address below

23913

| | | | | |
|---------|-----------|----------|--|--|
| Name | | | | |
| Address | | | | |
| City | State | Zip Code | | |
| Country | Telephone | Fax | | |

| | | | |
|-------------------|---------------------------|-----------------------------------|-------------------|
| NAME (Print/type) | Jolene W. Appleman | Registration No. (Attorney/Agent) | 35,428 |
| Signature | <i>Jolene W. Appleman</i> | Date | February 13, 2002 |

02/13/02

JC698 U.S. PTO

107449

JC698 U.S. PTO

10/075849

02/13/02

**FEE TRANSMITTAL
For FY 2001***Patent Fees are subject to annual Revision***Total Amount of Payment** (\$ 920.00)**METHOD OF PAYMENT**

1. ☒ The commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit
Account
Number

16-1445

Deposit
Account
Name

Pfizer Inc

Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17Applicant claims small entity status.
See 37 CFR 1.272. ☐

Payment Enclosed:



Check



Credit card



Money Order



Other

FEE CALCULATION**1. BASIC FILING FEE**

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|-------------------|----------|--------------|----------|--------------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 101 | 740 | 201 | 355 | Utility filing fee | 740.00 |
| 106 | 330 | 206 | 165 | Design filing fee | |
| 107 | 510 | 207 | 255 | Plant filing fee | |
| 108 | 740 | 208 | 370 | Reissue filing fee | |
| 114 | 160 | 214 | 80 | filing fee | |
| SUBTOTAL (1) (\$) | | | | | 740.00 |

2. EXTRA CLAIM FEES

| | | Extra Claims | | Fee from below | Fee Paid |
|--------------------|----------|--------------|----------|---|--------------|
| Total Claims | | | | | |
| 30 | -20**= | 10 | X | 18.00 | = 180.00 |
| Independent Claims | 2 | -3**= | 0 | X | 84.00 = 0.00 |
| Multiple Dependent | | | | | = |
| Large Entity | | Small Entity | | Fee Description | Fee Paid |
| Fee Code | Fee Code | Fee code | Fee code | | |
| 103 | 18 | 203 | 9 | Claims in excess of 20 | |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 | |
| 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid | |
| 109 | 80 | 209 | 42 | **Reissue independent claims over original patent | |
| 110 | 18 | 210 | 9 | **Reissue claims in excess of 20 and over original patent | |
| SUBTOTAL (2) (\$) | | | | | 180.00 |

** or number previously paid, if greater; For Reissues, see above

Complete if Known

| | |
|----------------------|---------------------|
| Application Number | Not Yet Assigned |
| Filing Date | Herewith |
| First Named Inventor | Harry R. Howard Jr. |
| Examiner Name | Not Yet Assigned |
| Group/Art Unit | Not Yet Assigned |
| Attorney Docket No. | PC11838A |

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

| Fee Code | Large Entity Fee (\$) | Fee Code | Small Entity Fee (\$) | Fee Description | Fee Paid |
|----------|-----------------------|----------|-----------------------|--|----------|
| 105 | 130 | 205 | 65 | Surcharge - late fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge-late filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for <i>ex parte</i> reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 400 | 216 | 200 | Extension for reply within second month | |
| 117 | 920 | 217 | 460 | Extension for reply within third month | |
| 118 | 1,440 | 218 | 720 | Extension for reply within fourth month | |
| 128 | 1,960 | 228 | 980 | Extension for reply within fifth month | |
| 119 | 320 | 219 | 160 | Notice of Appeal | |
| 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | |
| 121 | 280 | 221 | 140 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,280 | 241 | 640 | Petition to revive - unintentional | |
| 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) | |
| 143 | 460 | 243 | 230 | Design issue fee | |
| 144 | 620 | 244 | 310 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR 1.129(a)) | |
| 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 710 | 279 | 355 | Request for Continued Examination(RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |

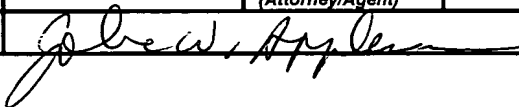
Other (specify) _____

*Reduced by Basic Filing Fee Paid

Subtotal (3)

0.00

SUBMITTED BY*Complete (if applicable)*

| | | | | | |
|----------------------|---|-----------------------------------|--------|-----------|-------------------|
| Type or Printed Name | Jolene W. Appleman | Registration No. (Attorney/Agent) | 35,428 | Telephone | 212-733-3552 |
| Signature |  | | | Date | February 13, 2002 |